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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Space Coast Chiropractor, INC.		
DOCUMENT NUMBER: P10000047026		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Dr. Rodney Fountain, D.C. (Name of Contact Person)		
(Firm/Company)		
4352 S. Kirkman Rd. #1214		
Orlando, FL. 328// (City/State and Zip Code)		
For further information concerning this matter, please call:		
Dr. Rodney Fourtein at (850) 485-6749 (Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
Stiling Fee \$\Bigcup \\$43.75 \text{ Filing Fee & Barring Fee & Barring Fee & Certificate of Status & Certified Copy (Additional copy is enclosed) \$\Bigcup \\$43.75 \text{ Filing Fee & Barring Fee & Certified Copy (Additional copy is enclosed)} \$\Bigcup \\$43.75 \text{ Filing Fee & Certified Copy (Additional copy is enclosed)}		

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

1.00

Pursuant to section 607,1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: oast Chiropractor, INC. The document number of the corporation (if known): Plobooo47026 SECOND: The file date of the articles of incorporation: 06-02-10THIRD: FOURTH: (CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued. The corporation has not commenced business. FIFTH: No debt of the corporation remains unpaid. The net assets of the corporation remaining after winding up have been distributed SIXTH: to the shareholders, if shares were issued. SEVENTH: Adoption of Dissolution (CHECK ONE) A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) (Typed or printed name of person signing)

Filing Fee: \$35 * (No shares is sned)
Please dissolve corp. immediately upon reciept. Rolling tribuse